

COLUMBIA COUNTY
COMMUNITY YOUTH AID PANEL
APPLICATION FOR MEMBERSHIP

Name: _____
 Last First Middle

Address: _____
 Number & Street City State Zip Code

Date of Birth: _____ Social Security #: _____

Phone No: () _____ - _____ Email Address: _____

How long have you lived at your present address? _____

Borough or Township of Residence: _____

Employer: _____

Present Occupation: _____ How long? _____

Work Address: _____ Phone No: () _____ - _____

Education -Circle highest grade completed - (4) (5) (6) (7) (8) (9) (10) (11) (12)

College- (1) (2) (3) (4) What was your major area of study? _____

Do you have any special skills or training? _____

Are you a candidate for political or public office? [] Yes [] No

For what office are you a public or political candidate? _____

Any U.S. Military Service: _____ Rank & length of service _____

Please describe any previous volunteer experience: _____

Please describe those organizations to which you belong: (Civic, Church, Social, Fraternal, etc.):

Please describe those skills that you possess and those aspects of your personality that render you well suited to perform as a candidate for the Community Youth Aid Panel Program: _____

Have you ever been arrested for or convicted of a crime? [] Yes [] No
Have you ever been the subject of a child abuse report or investigation? [] Yes [] No
Have you ever had a Protection From Abuse (PFA) order filed against you? [] Yes [] No

If yes to any of the above, please explain. (A yes answer does not automatically exclude you from being considered for the Community Youth Aid Panel Program.): _____

How did you learn of the Community Youth Aid Panel Program?
[] Civic or Social Meeting [] Friend [] Newspaper [] Other

Please list three references:

Name	Address	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

- I certify that the answers given herein are true and complete to the best of my knowledge.
- I authorize the investigation of all statements contained in this application for volunteer service as may be necessary for arriving at an acceptance decision.
- I agree to allow Columbia County, its managers and/or authorized personnel, to contact any references I have listed on my volunteer application.
- I agree to submit to a Criminal Background Check which can be found at:
<https://epatch.state.pa.us/Home.jsp>
- I agree to submit a Child Abuse Clearance which can be found at:
<https://www.compass.state.pa.us/cwis/public/home>
- I understand if accepted into the program, I will abide by all rules and regulations of Columbia County and the Community Youth Aid Panel Program.

Applicant's Signature

Date

Return To: Columbia County Juvenile Probation
Gary O'Neal, Juvenile Probation Officer
26 West First Street, PO Box 380
Bloomsburg, PA 17815